



COORDINATING OFFICE FOR TERRORISM PREPAREDNESS AND EMERGENCY RESPONSE

**Grant Number:** 3U90TP000531-03S2 REVISED  
**FAIN:** U90TP000531

**Principal Investigator(s):**  
Melissa N Friel

**Project Title:** TP12-1201 HPP AND PHEP COOPERATIVE AGREEMENTS

BRET FISCHER  
STATE OF MISSOURI  
P.O. BOX 570  
920 WILDWOOD DRIVE  
JEFFERSON CITY, MO 65102

**Award e-mailed to:** grants@health.mo.gov

**Budget Period:** 04/01/2015 – 06/30/2017  
**Project Period:** 04/01/2015 – 06/30/2017

Dear Business Official:

The Centers for Disease Control and Prevention hereby revises this award (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to MISSOURI STATE DEPARTMENT OF HEALTH & SENIOR SERVICES in support of the above referenced project. This award is pursuant to the authority of SEC391(A)317(K)OPHS42U.S.C.SEC241A 247B and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,

Shicann Phillips  
Grants Management Officer  
Centers for Disease Control and Prevention

Additional information follows

**SECTION I – AWARD DATA – 3U90TP000531-03S2 REVISED**

**Award Calculation (U.S. Dollars)**

Salaries and Wages	\$82,614
Fringe Benefits	\$14,459
Personnel Costs (Subtotal)	\$97,073
Equipment	\$257,286
Supplies	\$68,674
Travel Costs	\$56,192
Consortium/Contractual Cost	\$1,746,356
Other	\$87,488
Federal Direct Costs	\$2,313,069
Federal F&A Costs	\$14,337
Approved Budget	\$2,327,406
Federal Share	\$2,327,406
<b>TOTAL FEDERAL AWARD AMOUNT</b>	<b>\$2,327,406</b>

**AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0**

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

04 \$0  
05 \$0

**Fiscal Information:**

CFDA Number: 93.074  
EIN: XXXXXXXXXX  
Document Number: TP00053115

IC	CAN	2015
TP	93902YK	\$2,327,406

SUMMARY TOTALS FOR ALL YEARS		
YR	THIS AWARD	CUMULATIVE TOTALS
3	\$2,327,406	\$2,327,406
4	\$0	\$0
5	\$0	\$0

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

**CDC Administrative Data:**

PCC: N / OC: 4151 / Processed: ERAAPPS 03/16/2016

**SECTION II – PAYMENT/HOTLINE INFORMATION – 3U90TP000531-03S2 REVISED**

For payment information see Payment Information section in Additional Terms and Conditions.

**INSPECTOR GENERAL:** The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to [hhstips@oig.hhs.gov](mailto:hhstips@oig.hhs.gov) or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award.

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**SECTION III – TERMS AND CONDITIONS – 3U90TP000531-03S2 REVISED**

This award is based on the application submitted to, and as approved by, CDC on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
- d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

This award has been assigned the Federal Award Identification Number (FAIN) U90TP000531. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

**Treatment of Program Income:**  
Other (See Remarks)

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**SECTION IV – TP Special Terms and Conditions – 3U90TP000531-03S2 REVISED**

Funding Opportunity Announcement (FOA) Number: TP12-12010302SUPP15  
Award Number: **TP000531-03S2**  
Award Type: Cooperative Agreement  
Applicable Cost Principles: 2 CFR Part 225 Cost Principles for State, Local, and Indian Tribal Governments (OMB Circular A-87)

<b>AWARD INFORMATION</b>
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**TERMS AND CONDITIONS OF THIS AWARD**

Note 1: The purpose of the amendment is to provide a nine month (9) extension to address planning and operation response gaps for Ebola, Zika and other infectious disease. The budget period and project period end date has been extended from September 30, 2016 to June 30, 2017.

Note 2: All PHEP Ebola supplemental funds should be used for the purpose of the grant program and align with the approved scope of work. Any proposed activities beyond the approved scope of work will require a prior approval request from the recipient to their assigned Grants Management Specialist and the PHEP Project Officer.

Note 3: This revised Notice of Award also authorizes a redirection of funds in the amount of \$202,315 to support contractual, travel, supplies and other expenditures. We have reviewed the documentation submitted by your organization, dated March 7, 2016, and find it to be acceptable. Please refer to the revised cost categories in the attached spreadsheet.

Note 4: Funding cannot be used for activities already covered by other Federal grants and or cooperative agreements.

Note 5: Costs associated with the use of PHEP Ebola Supplemental funds to prepare for suspected or known Zika affected patients, including the development of action plans, purchase of supplies for public health activities, and training for all personnel are allowable expenses and must be approved by the Program prior to use.

Note 6: **Programmatic Restrictions:** The following funds are hereby restricted and cannot be drawn down from the Payment Management System (PMS), until a revised budget is submitted and a Notice of Award is received:

**Supplies**

- Item 11 - Mosquito trapping supplies specific to Aedes species mosquitoes (includes traps, batteries, lures and baits, and other supplies). (\$7,000)

### Contractual

- Item 8 - Contractor(s) to be identified, preferably medical entomologist with experience in Aedes species surveillance, laboratory testing, and control. (\$38,175)
- Item 9 - 8 Selected Local Public Health Agencies (LPHAs). (\$36,000)
- Item 10 - Selected Local Public Health Agencies (LPHAs). (\$24,750)

### Travel

- Item 4 - Southeast Missouri location for training on Culex and Aedes species. (\$6,150)
- Item 5 - St. Louis area training for training on Culex and Aedes species. (\$8,100)
- Item 6 - Kansas City area training for training on Culex and Aedes species (June 2017). (\$7,800)
- Item 7 - Springfield area training for training on Culex and Aedes species (June 2017). (\$6,300)

### Other

- Item 8 - Development and printing of 15,000 copies of a 2"x6" rabies awareness information card (glossy plastic). (\$2,500)
- Item 9 - 8 temporary personnel positions (college or graduate school students) through an existing statewide contract (Contract # C312169002) with Above All Personnel to conduct LPHAs with mosquito surveillance. (\$41,165)

**Note 7: Closeout Requirements:** Grantees must submit closeout reports in a timely manner. Unless the Grants Management Specialist/Grants Management Officer (GMS/GMO) approves a deadline extension the grantee must submit all closeout reports within 90 days after the last day of the final budget period. Reporting timeframe is **April 1, 2015** through **June 30, 2017**. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

All manuscripts published as a result of the work supported in part or whole by the cooperative grant must be submitted with the progress reports.

An original plus two copies of the reports must be mailed to the GMS for approval by the GMO by the due date noted. Ensure the Award and Program Announcement numbers shown above are on the reports.

The final and other programmatic reports required by the terms and conditions of the NoA are the following.

**Final Performance Report:** An original and two copies are required. At a minimum, the report should include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

**Final Federal Financial Report (FFR, SF-425):** The FFR should only include those funds authorized and actually expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted to the GMO/GMS no later than 90 days after the end of the project period. This report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Department of Health and Human Services' Payment Management Services (PMS), you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

If the final reports (FFR and Final Progress Report) cannot be submitted within 90 days after the end of the project period, in accordance with 45 CFR Part 75.381 (Closeout), the grantee must submit a letter requesting an extension that includes the justification for the delay and state the expected date the CDC Office of Grants Services will receive the reports. All required documents must be mailed to the business contact identified in Staff Contacts.

**Equipment Inventory Report:** An original and two copies of a complete inventory must be submitted for all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more. The inventory list must include the description of the item, manufacturer serial and/or identification number, acquisition date and cost, percentage of Federal funds used in the acquisition of the item. The grantee should also identify each item of equipment that it wishes to retain for continued use in accordance with 45 CFR Part 75. These requirements do apply to equipment purchased with non-federal funds for this program. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award referenced in the cover letter. CDC will notify the grantee if transfer to title will be required and provide disposition instruction on all major equipment. Equipment with a unit acquisition cost of less than \$5,000 that is no longer to be used in projects or programs currently or previously sponsored by the Federal Government may be retained, sold, or otherwise disposed of, with no further obligation to the Federal Government. If no equipment was acquired under this award, a negative report is required.

**Final Invention Statement:** An original and two copies of a Final Invention Statement are required. Electronic versions of the form can be downloaded by visiting <http://grants1.nih.gov/grants/hhs568.pdf>. If no inventions were conceived under this assistance award, a negative report is required. This statement may be included in a cover letter.

Note 8: Please be advised that the recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to the cooperative agreement are allowable, allocable, consistent and reasonable. All funds must be obligated no later than the end of the current budget period dated 06/30/2017. If the actual amount of available unobligated funds is less than the amount identified on this Notice of Award, the total approved budget may be reduced by the difference in a subsequent award action.

Note 9: All other terms and conditions of the original Ebola Supplement #2 issued with the original award remain in effect unless otherwise changed in writing, by the Grants Management Officer.

**Programmatic Contact:**

**Brandi Jordan**, Project Officer  
Centers for Disease Control  
Public Health Emergency Preparedness Program  
Telephone: 404-639-7856  
Email: [HY94@cdc.gov](mailto:HY94@cdc.gov)

**STAFF CONTACTS**

**Grants Management Specialist:** Terika Slocumb  
University Office Park, Colgate Bldg  
Brandywine Road  
Atlanta, GA 30341  
Email: [wwq5@cdc.gov](mailto:wwq5@cdc.gov) Phone: 770-488-2051

**Grants Management Officer:** Shicann Phillips  
Center for Disease Control and Prevention  
ONDIEH  
1825 Century Center Blvd MS E-85  
Atlanta, GA 30345  
Email: [IBQ7@CDC.GOV](mailto:IBQ7@CDC.GOV) Phone: 404.498.3013

**SPREADSHEET SUMMARY**

**GRANT NUMBER:** 3U90TP000531-03S2 REVISED

**INSTITUTION: MISSOURI STATE DEPT/ HEALTH & SENIOR SRV**

Budget	Year 3	Year 4	Year 5
Salaries and Wages	\$82,614		
Fringe Benefits	\$14,459		
Personnel Costs (Subtotal)	\$97,073		
Equipment	\$257,286		
Supplies	\$68,674		
Travel Costs	\$56,192		
Consortium/Contractual Cost	\$1,746,356		
Other	\$87,488		
TOTAL FEDERAL DC	\$2,313,069		
TOTAL FEDERAL F&A	\$14,337		
TOTAL COST	\$2,327,406	\$0	\$0

# ATTACHMENT A

<b>AWARD NUMBER: TP000531-03S2</b>			
<b>These funds have been distributed by Cost categories as follows</b>			
<b>Budget Categories</b>	<b>Current Award</b>	<b>Redirection</b>	<b>Revised Award Amount</b>
Salaries & Wages	\$200,480	(\$117,866)	\$82,614
Fringe Benefits	66,320	(\$51,861)	14,459
Consultants	0	\$0	0
Equipment	257,286	\$0	257,286
Supplies	59,874	\$8,800	68,674
Travel	45,452	\$10,740	56,192
Other	25,138	\$62,350	87,488
Contractual	1,625,931	\$120,425	1,746,356
<b>Total Direct</b>	<b>\$2,280,481</b>		<b>\$2,313,069</b>
<b>Indirect Costs</b>	46,925	(\$32,588)	14,337
<b>Total Costs</b>	<b>\$2,327,406</b>		<b>\$2,327,406</b>

